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## BIB DATA SHEET

CONFIRMATION NO. 1828

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
09/891,715	06/26/2001	424	3763	5756-0013.30	
<b>RULE</b>					
<b>APPLICANTS</b> Richard L. Mueller, Byron, CA; U. Hiram Chee, Santa Cruz, CA; James R. Kermode, Sunnyvale, CA;					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/214,053 06/26/2000					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b>					
08/15/2001					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /THEODORE J STIGELL/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 9	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> Glenn M. Seager C/O Crompton, Seager & Tufte LLC Suite 800 1221 Nicollet Avenue Minneapolis, MN 55403-2420 UNITED STATES					
<b>TITLE</b> Method and apparatus for treating ischemic tissue					
<b>FILING FEE RECEIVED</b> 658	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	